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## BIB DATA SHEET

CONFIRMATION NO. 6102

|  |   |  |  |  |                           |                                |
|--|---|--|--|--|---------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>09/402,563   | <b>FILING or 371(c) DATE</b><br>10/05/1999<br><b>RULE</b>   | <b>CLASS</b><br>705                                      | <b>GROUP ART UNIT</b><br>3628          | <b>ATTORNEY DOCKET NO.</b><br>SCQ-001USRCE2                  |                           |                                |
| <b>APPLICANTS</b><br>LEO K. VAN ROMUNDE, TB ROTTERDAM, NETHERLANDS;<br>PAUL CLAUDE KAISER, BG DEN HAAG, NETHERLANDS;<br><b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/EP98/03195 05/28/1998<br><b>** FOREIGN APPLICATIONS *****</b><br>BELGIUM 9800103 02/11/1998<br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY **</b><br>03/08/2004 |   |  |  |  |                           |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Verified and Acknowledged <u>/ROB WU/</u><br>Examiner's Signature  |   | <input type="checkbox"/> Met after Allowance<br>Initials | <b>STATE OR COUNTRY</b><br>NETHERLANDS | <b>SHEETS DRAWINGS</b><br>1                                  | <b>TOTAL CLAIMS</b><br>17 | <b>INDEPENDENT CLAIMS</b><br>2 |
| <b>ADDRESS</b><br>LAHIVE & COCKFIELD, LLP<br>FLOOR 30, SUITE 3000<br>ONE POST OFFICE SQUARE<br>BOSTON, MA 02109<br>UNITED STATES   |   |  |  |  |                           |                                |
| <b>TITLE</b><br>SYSTEM AND METHOD FOR STEERING INTERRELATED ACTIONS  |   |  |  |  |                           |                                |
| <b>FILING FEE RECEIVED</b><br>470  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  |  | <input type="checkbox"/> All Fees                            |                           |                                |
|  |   |  |  | <input type="checkbox"/> 1.16 Fees (Filing)                  |                           |                                |
|  |   |  |  | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |                           |                                |
|  |   |  |  | <input type="checkbox"/> 1.18 Fees (Issue)                   |                           |                                |
|  |   |  |  | <input type="checkbox"/> Other _____                         |                           |                                |
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